



Application for Certification as an Eligible Energy Resource Under the Delaware Renewable Energy Portfolio Standard

1. Name of Facility

Schultz, Gerard and Linda Residence - G and L Schultz

2. Facility Address

106 Ponder Lane

Smyrna, DE 19977

Is the facility located within the PJM control area?

☒ Yes

☐ No

If No, does the Facility have import capabilities?

☐ Yes

☐ No

3. Name of Owner

Gerard & Linda Schultz

Mailing Address

same as facility address

Phone (302) 653 - 8117

Fax

Email elda13ann@yahoo.com

4. Name of Operator

same as owner

Mailing Address

Phone Fax

Email

5. Name of Contact Person

Allyson Browne, SRECTrade, Inc.

Mailing Address

201 California Street, Suite 630

San Francisco, CA 94111

Phone 877-466-4606

Fax 732-453-0065

Email applications@srectrade.com

6. Name of REC/SREC Owner

same as owner

Mailing Address

Phone _____

Fax _____

Email _____

7. List all PJM-EIS GATS State Certification Numbers assigned to this facility:

8. Operational Characteristics:

Fuel Types Used (check all that apply):

☐ Gas combustion from the anaerobic digestion of organic material

☐ Geothermal

☐ Ocean, wave or tidal actions, currents, or thermal differences

☐ Qualified Biomassⁱ

☐ Qualified Fuel Cellsⁱⁱ

☐ Qualified Hydroelectricⁱⁱⁱ

☐ Qualified Methane Gas captured from a landfill gas recovery system^{iv}

☒ Solar

☐ Wind

If co-firing, provide the formula on file with PJM Environmental Information Services, Inc. (PJM-EIS) n/a

Rated Capacity (in megawatts) 0.0055 MW (5.5 kW) ✓

If multiple fuel types are utilized, attach the formula for computing the proportion of output per fuel type by megawatts per hour generated.

Facility **Final Approved Interconnection Date** 04/28/2016 ✓

If co-firing with fossil fuels, co-fire start date n/a

If co-firing with fossil fuels, attach the allocation formula on file with PJM.

9. Is the Applicant's facility customer-sited generation^v?

☒ Yes ☐ No

Is the Applicant's facility a community owned generating facility^{vi}?

☐ Yes ☒ No

Can the output from the customer-sited generation be appropriately metered?

☒ Yes ☐ No

I, Allyson Browne (print name) hereby certify under penalty of perjury that

1. I have made reasonable inquiry, and the information contained in this Application is true and correct to the best of my knowledge, information and belief.
2. I am authorized to submit and execute this Application and to bind myself and/or my company to the representations contained herein.
3. I /my company agree(s) to comply with and be subject to the jurisdiction of the Public Service Commission of the State of Delaware for any matters arising out of my submission of this Application or the granting of the Application.
4. In the event that any of the information contained in this Application changes pending the consideration of this Application or after the Application is granted, I/my company will amend the Application to provide the Commission with such changed information.
5. I acknowledge that if any of the representations made in this Application or in any amendment thereto are found to be untrue when made, I/the company may be subject to sanctions, including but not limited to monetary fines and/or the revocation of any Certificate granted as a result of the representations made in this Application.

Signature: Allyson Browne

Date: 05/24/2016

Required Documentation:

- If the facility is customer-sited generation, attach a copy of the utility's Final Approved Interconnection Agreement
- If the facility is a community-owned energy generating facility, attach a list of contact information (names, address, phone number, fax, and email) of all owners or customers who are sharing the output of the generator.
- One copy of U.S. Department of Energy, Energy Information Administration Form EIA-860, if rated capacity is >1.0 MW

ⁱ "Qualified Biomass" means electricity generated from the combustion of biomass that has been cultivated in a sustainable manner as determined by Delaware Department of Natural Resources and Environmental Control (DNREC), and is not combusted to produce energy in a waste to energy facility or in an incinerator.

ⁱⁱ "Qualified Fuel Cells" means electricity generated by a fuel cell powered by Renewable Fuels, as that term is defined in Section 1.0 of the Rules and Procedures to Implement the Renewable Energy Portfolio Standard, Delaware Public Service Commission Regulation Docket No. 56.

ⁱⁱⁱ "Qualified Hydroelectric" means electricity generated by a hydroelectric facility that has a maximum design capacity of 30 megawatts or less from all generating units combined that meet appropriate environmental standards as determined by DNREC.

^{iv} "Qualified Methane Gas" means electricity generated by the combustion of methane gas captured from a landfill gas recovery system; provided, however, that:

1. Increased production of landfill gas from production facilities in operation prior to January 1, 2004 demonstrates a net reduction in total air emissions compared to flaring and leakage;
2. Increased utilization of landfill gas at electric generating facilities in operation prior to January 1, 2004 (i) is used to offset the consumption of coal, oil, or natural gas at those facilities, (ii) does not result in a reduction in the percentage of landfill gas in the facility's average annual fuel mix when calculated using fuel mix measurements for 12 out of any continuous 15 month period during which the electricity is generated, and (iii) causes no net increase in air emissions from the facility; and
3. Facilities installed on or after January 1, 2004 meet or exceed 2004 Federal and State air emission standards, or the Federal and State air emission standards in place on the day the facilities are first put into operation, whichever is higher.

^v "Customer-sited Generation" means a generating unit that is interconnected on the end use customer's side of the retail electricity meter in such a manner that it displaces all or part of the metered consumption of the end-use customer.

^{vi} "Community-owned Energy Generating Facility" means a renewable energy generating facility that has multiple owners or customers who share the output of the generator, which may be located either as a stand-alone facility or behind the meter of a participating owner or customer. The facility shall be interconnected to the distribution system and operated in parallel with an electric distribution company's transmission and distribution facilities.



We support renewable energy and partner with our customers to ensure safe and reliable interconnection of renewable energy into the electric grid.

Your request is documented as follows:

Customer Name: LINDA A SCHULTZ

Street Address: 106 PONDER LN

City, State: SMYRNA, DE

Account Number: 55011701707

Tracking Number:

Source: SOLAR

Generation Size: 4.73

Add-On: NO

Tariff: NET METER

Thank you for completing the interconnection application process. Your system is now authorized for operation.

Delmarva Power MD has accepted the completed interconnection application for this system. The Net Energy Meter for this system has been installed. **Delmarva Power MD** has determined that the requirements for this interconnection request have been met. You are now authorized to interconnect and fully operate this renewable energy system as of **04/28/2016**.

Attached are the completed interconnection documents for your records. This finalizes the application process. Thank you for the opportunity to facilitate your request.

Thank you for the opportunity to assist you with your interconnection request. If you have any questions or concerns, please call (866) 634-5571. **To ensure a response, please send all correspondence to gpc-north@pepcoholdings.com**



Energy for a changing world.™

Your Green Power Connection Team

A PHI Company

(866) 634-5571 - Phone

Mailing Address: 5 Collins Drive, Mail Stop 84CP22, Carneys Point, NJ 08069

For more information on the complete interconnection process, visit: www.delmarva.com/GPC



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PART 1

DELAWARE LEVEL 1 INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Application & Conditional Agreement – to be completed prior to installation)

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name: Gerard & Linda Shultz
Mailing Address: 106 Ponder Lane
City: Smyrna State: De Zip Code: 19977

Contact Person (If other than above): Linda

Mailing Address (If other than above): Same

Telephone (Daytime): 302 653-8117 (Evening): _____

Facsimile Number: _____ E-Mail Address (Required): elda13ann@yahoo.com

Alternate Contact Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: _____ E-Mail Address: _____

FACILITY INFORMATION

Facility Address: 106 Ponder Lane

City: Smyrna State: DE Zip Code: 19977

DPL Account # of Facility Site: 5501 1701 707 (5501 1701 707)

Energy Source: Solar Prime Mover: PV

Type of Application: Initial ☒ Addition/Upgrade ☐ ¹

DC Nameplate Rating: 5.5 (kW) _____ (kVA), AC Inverter Rating 4.73 (kW), AC System
Design Capacity: 4.73 (kW) _____ (kVA)

¹ Initial if first time generator request. Addition/Upgrade if this is an add-on to a previously approved system.

Generator (or PV Panel) Manufacturer, Model #: Axitec AC-250m/156-60S
(A copy of Generator Nameplate and Manufacturer's Specification Sheet May Also be Submitted)

Inverter Manufacturer: Enphase Model # & Rating: M215-60-22L-S2X-16

Number of Inverters: 22

Ampere Rating: .9 (each) Amps_{AC}, Number of Phases: ☒ 1 ☐ 3, Voltage Rating: 240 V_{AC},

Nominal DC Voltage: 48 V_{DC}, Power Factor: .95 %, Frequency: 60 Hz,

DPL Accessible Disconnect or Lock Box: ☒ Yes ☐ No, If Yes, Location: near meter

One-line Diagram Attached (Required): ☒ Yes ☐ No, Site Plan Attached (Required): ☒ Yes ☐ No

Do you plan to export power?² ☐ Yes ☒ No, If Yes, Estimated Maximum: _____ kW_{AC}

Estimated Gross Annual Energy Production: _____ kWh 7538

Is the inverter IEEE/UL1741 lab certified? Yes ☒ No ☐ (If yes, attach manufacturer's cut sheet showing listing and label information from the appropriate listing authority, e.g. UL 1741 listing. If no, facility is not eligible for Level 1 Application.)

Estimated Commissioning Date: 10/1/15

EQUIPMENT INSTALLATION CONTRACTOR Check if owner-installed ☐

Name: Eco Solar Solutions (Chris Kerr)

Mailing Address: 703 E Polaski Hwy

City: Elkton State: Md. Zip Code: 21921

Telephone (Daytime): 302 893 0073 (Evening): _____

Facsimile Number: _____ E-Mail Address (Required): Chris@eco-solar-solutions.com

ELECTRICAL CONTRACTOR

Name: Top Notch Electrical (Steve Adams)

Mailing Address: 123 Connelly Rd.

City: Rising Sun State: Md. Zip Code: 21911

Telephone (Daytime): 410-441-9782 (Evening): _____

Facsimile Number: _____ E-Mail Address: topnotchelectrical@zoominternet.net

License number: TI-0005682

Active License? Yes ☒ No ☐

Is small generator facility eligible for Net Metering? Yes ☒ No ☐

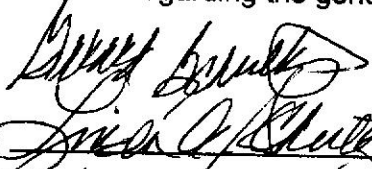
² Yes, if your expected maximum output of the inverter (kW AC) is greater than the lowest load you anticipate at your facility during maximum PV output (kW). The difference would be the amount you may export.

INSURANCE DISCLOSURE

The attached terms and conditions contain provisions related to liability and indemnification, and should be carefully considered by the interconnection customer. The interconnection customer is not required to obtain general liability insurance coverage as a precondition for interconnection approval; however, the interconnection customer is advised to consider obtaining appropriate insurance coverage to cover the interconnection customer's potential liability under this agreement.

CUSTOMER SIGNATURE

I hereby certify that: 1) I have read and understand the terms and conditions which are attached hereto by reference and are a part of this Agreement; 2) I hereby agree to comply with the attached terms and conditions; and 3) to the best of my knowledge, all of the information provided in this application request form is complete and true. I consent to permit the PSC and interconnecting utility to exchange information regarding the generating system to which this application applies.

Interconnection Customer Signature:  Date: 7/16/15
Printed Name: Berard Schultz Title: Homeowner
Linda A. Schultz

Conditional Agreement to Interconnect Small Generator Facility (for EDC use only)

Receipt of the application fee is acknowledged and, by its signature below, the EDC has determined the interconnection request is complete. Interconnection of the small generator facility is conditionally approved contingent upon the attached terms and conditions of this Agreement the return of the attached Certificate of Completion duly executed, verification of electrical inspection and successful witness test or EDC waiver thereof.

EDC Signature: _____ Date: _____
Printed Name: _____ Title: _____



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PART 2

DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Final Agreement – must be completed after installation and prior to interconnection)

Certificate of Completion

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Name: Gerard & Linda Schultz
Mailing Address: 106 Ponder Lane
City: Smyrna State: De Zip Code: 19977
Telephone (Daytime): 302 653 8117 (Evening): _____
Facsimile Number: _____ E-Mail Address: eldal3ann@yahoo.com

FACILITY INFORMATION

Facility Address: 106 Ponder Lane
City: Smyrna State: DE Zip Code: 19977
DPL Account # of Facility Site: 5501 1701 707
Energy Source: SOLAR Prime Mover: PV
DC Nameplate Rating: 5.5 (kW) — (kVA), AC Inverter Rating 4.73 (kW), AC System
Design Capacity: 4.73 (kW) — (kVA)
Inverter Manufacturer: Enphase Model # & Rating: M215-60-222-S2X
Number of Inverters: 22 215w

EQUIPMENT INSTALLATION CONTRACTOR

Check if owner-installed ☐

Name: Eco Solar Solutions
Mailing Address: 36 Austins Way
City: Elkton State: Md Zip Code: 21921
Telephone (Daytime): 302 893 0073 (Evening): _____
Facsimile Number: _____ E-Mail Address: Chris@eco-solarsolutions.com

FINAL ELECTRIC INSPECTION AND INTERCONNECTION CUSTOMER SIGNATURE

The Small Generator Facility is complete and has been approved by the local electric inspector having jurisdiction. A signed copy of the electric inspector's form indicating final approval is attached. The Interconnection Customer acknowledges that it shall not operate the Small Generator Facility until receipt of the final acceptance and approval by the EDC as provided below.

below.

Signed: Grandchild Linda R. Smith Date 4/26/16
(Signature of interconnection customer)

Printed Name: Gerard Schultz, Linda A. Schultz

Type of Application: New/Initial ☒ Growth/Increase ☐ System Capacity 5.5 KW (DC)
Check if copy of signed electric inspection form is attached ☒

ACCEPTANCE AND FINAL APPROVAL FOR INTERCONNECTION *(for EDC use only)*

The interconnection agreement is approved and the Small Generator Facility is approved for interconnected operation upon the signing and return of this Certificate of Completion by EDC:

Electric Distribution Company waives Witness Test? (Initial) Yes (DCD) No ()
If not waived, date of successful Witness Test: _____ Passed: (Initial) ()

EDC Signature: _____ Date: 4/28/16

Printed Name: Diana C. DeAngelis Title: Regulatory Affairs Lead

First State Inspection Agency, Inc.
1001 Mattlind Way
Milford, DE 19963

1-800-468-7338
302-422-3859

Adams, Steven
Top Notch Electrical Services LLC
123 Connelly Road
Rising Sun, MD 21911

CERTIFICATE

Final Inspection Date: 4/20/16
Application #: 022407
Owner: Gerard & Linda Schultz
Customer Job #:
Occupancy: Solar 5.5 KW
Location: 106 Ponder Lane, Smyrna, New Castle, DE

This certifies that the installation of electrical equipment listed on referenced application has been approved as meeting the requirements of the National Electric Code, utility, municipalities and Agency rules. Any modification, addition or alteration of the electrical system, after the date of final inspection, will require a new application for inspections and certifications.


Chief Electrical Inspector

F.S. CERT

10. If the Applicant's installation is solar or wind sited in Delaware, is a minimum of 50% of the cost of the renewable energy equipment, inclusive of mounting components, manufactured in Delaware?

☐ Yes*

☒ No

Eco Solar Solutions

Company Name of Installer

36 Austine Way

Address

Exton Md. 21921

Address

Chris Kerr

Signature of Company Representative

Chris Kerr

Print Name of Co. Representative

***If Yes, please attach the following documentation:**

- A copy of the supplier's invoice showing Delaware manufactured equipment with this facility identified
 - If the supplier's invoice shows only a coded Purchase Order (PO) number, a copy of the company's matching PO that includes the address where the materials were used/installed, must also be supplied
 - If using a master invoice, a record of the draws against the purchased quantity, on the master invoice, must show the address of each use and the quantity of material used

11. If the Applicant's installation is solar or wind sited in Delaware:

a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?

☐ Yes*

☒ No

b. Does the installing company employ, in total, a minimum of 75% workers who are Delaware residents?

☐ Yes*

☒ No

Eco Solar Solutions

Company Name of Installer

36 Austine Way

Address

Exton Md. 21921

Address

Chris Kerr

Signature of Company Representative

Chris Kerr

Print Name of Co. Representative

***If Yes, please attach supporting documentation (see pages 7-8 for details). Please note, in order to qualify for the Labor/Workforce Bonus, at least one of the options (a. or b.) must be met.**

Documentation Required for Delaware Labor/Workforce Bonus

11. If the Applicant's installation is solar or wind sited in Delaware:

- a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents? **NO**

If you answered yes to "a." above, complete the following as evidence.

The following individuals (list every employee) were employed by

Eco Solar Solutions

Installation Company Name

as direct labor (physical construction and installation) for this facility: (Attach additional sheets if necessary)

Please complete the following information for all individuals listed above:

Name	Home Address (As per Tax Withholding)	Social Security Number (Last 4 digits only)

Total Delaware Resident Employees: 6 Total Number of Employees: 3

% of Delaware Residents (Delaware Residents Divided by Total Employees): 0%

Documentation Required for Delaware Labor/Workforce Bonus

11. If the Applicant's installation is solar or wind sited in Delaware:

- b. Does the installing company employ, in total, a minimum of 75% of workers who are Delaware residents? NO

If you answered yes to "b." above, complete the following as evidence:

Eco Solar Solutions

Installation Company Name

employed the following individuals (list EVERY employee on the payroll during the period from project start date until project completion date). Projects are considered complete upon final interconnection approval to operate. (Attach additional sheets if necessary)

Project Start Date: _____ Project Complete Date: _____

Employee Full Name	Home Address (As per Tax Withholding)	Social Security Number (Last 4 digits Only)

Total Delaware Resident Employees: 0 Total Number of Employees: 3

% of Delaware Residents (Delaware Residents Divided by Total Employees): 0%